

USDC/ATTY-010 (Rev. 9/2014) Request for Transcript from an Electronic Recording or for Purchasing a Copy of an Audio Tape or CD

**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF WEST VIRGINIA**

AT Charleston

In re Ethicon, Inc., Pelvic Repair System Products
Liability Litigation

V.

CASE NUMBER 2:12-md-02327

**REQUEST FOR TRANSCRIPT FROM AN ELECTRONIC RECORDING
OR FOR PURCHASING A COPY OF AN AUDIO TAPE OR CD**

Requestor's name: David B. Thomas

Address: Thomas Combs & Spann, PLLC, P.O. Box 3824, Charleston, WV 25338

Telephone: 304.414.1817

Fax: 304.414.1801

E-mail address: rdavis@tcspllc.com

Judicial officer presiding: Judge Cheryl A. Eifert

Proceeding date(s): March 11, 2016

Proceeding location(s): Telephonic Motion Hearing

Proceeding type(s)¹: Telephonic Motion Hearing

Attorney present at hearing (*list all attorneys*):

Witness called at proceeding (*list all witnesses*):

Court reporter name/Tape number/Courtflow: Mary Schweinhagen

¹ Proceeding types include: Motion Hearing, Voir Dire, Jury Selection, Jury Trial, Day 1, 2, etc., Bench Trial, Day 1, 2, etc., Jury Verdict, Sentencing, Bond Hearing, Detention Hearing, Etc.

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Indicate type of transcript requested:

- | | |
|---|---|
| <input type="checkbox"/> Ordinary transcript (due 30 days from date assigned to court reporter) | <input type="checkbox"/> Daily |
| <input type="checkbox"/> 14-Day transcript (due 14 days from date assigned to court reporter) | <input type="checkbox"/> Hourly |
| <input checked="" type="checkbox"/> Expedited (due 7 days from date assigned to court reporter) | <input type="checkbox"/> Copy of an audio tape or CD of an electronically recorded proceeding |

Additional instructions (*Provide additional information which will aid in the preparation of the transcript*):

Please email the transcript to Robyn Davis at rdavis@tcspllc.com

I acknowledge that I am responsible for payment to the court reporter for the cost of a transcript of the proceedings described herein or that I am responsible to the Clerk of Court for payment of the cost for recording of the proceedings described herein. Further, I understand that this request will not be processed until appropriate financial arrangements are made.

By: /s/David B. Thomas*Requestor's Signature or e-Signature*Date: March 11, 2016

- | | |
|---|---|
| <input checked="" type="checkbox"/> Attorney (Civil or Criminal) | <input type="checkbox"/> Assistant United States Attorney |
| <input type="checkbox"/> CJA Attorney (completed CJA-24 attached) | <input type="checkbox"/> Pro Se Litigant |
| <input type="checkbox"/> Federal Public Defender | |

FOR OFFICIAL COURT USE ONLY:

Court reporter assigned: _____

Date assigned: _____

Delivery method:

- ☐ Hold for pickup
- ☐ Mail to above address
- ☐ Mail to: _____
- ☐ Ship overnight:

via _____

Account no.: _____

Priority: _____